

Sixth Edition Errata – October 2022

Table 6-2: *Desirable Weights for ~~Women~~ Men by Height and Body Build*

Section 15.2d Elbow

The elbow region is defined as the region midforearm to midhumerus, including all the bone, joint, ligamentous, and soft-tissue structures encompassing the ~~wrist~~ elbow joint. Instructions are provided in Sections [15.1](#) and [15.3](#) and involve the use of Tables ~~15-3, Wrist~~ [15-4, Elbow](#) Regional Grid, and the Table 15-6 adjustment grid (and associated Tables 15-7 to 15-9).

Examples 15-2, 15-3, 15-4, 15-9, 15-11

- 15-2: Impairment Rating: Regional Impairments: Diagnosis “fractures—proximal phalanx, middle phalanx, metacarpal” and per criteria of “Residual symptoms, consistent objective findings and/or functional loss; ~~uncomplicated or stable with normal motion~~” assigned to class 1 with midrange default value of 6% digit. Adjustment Grids: Functional History: Grade modifier 1, Physical Examination: Grade modifier 1, based on “minimal palpatory findings, consistently documented, without observed abnormalities”, Clinical Tests: Grade Modifier 1 based on “clinical studies confirm diagnosis, mild pathology”. Net adjustment compared with diagnostic class is 0 and remains at default. Therefore, 6% impairment of the digit. Converts by Table 15-12, Impairment Values Calculated From Digit Impairment, to 2% hand impairment (HI), 1% UEI and 1% WPI.
- 15-3: Impairment Rating: Regional Impairments: Diagnosis “digital stenosing tenosynovitis (trigger digit)” and per criteria of “Symptomatic trigger finger +/- surgery. “Persistent triggering; ~~uncomplicated or stable with normal motion~~” assigned to class 1 with midrange default value of 6% digit. Adjustment Grids: Functional History: Grade modifier 2; Physical examination: Grade modifier 2; Clinical tests: Grade modifier not applicable (n/a). Net adjustment compared with diagnostic class is +2, assigned to grade E (highest assignment). Therefore, 8% digit impairment. Converts by Table 15-12 to 2% HI, 1% UEI, and 1% WPI.
- 15-4: Comment: Instability is part of the class determination in this case, and therefore is not used as a physical examination adjustment. Per Table 15-31, Finger Range of Motion, her range of motion findings of DIP flexion 50° result in a 10% digit impairment (grade modifier 1) and her –20° extension lag results in 2% digit impairment (also grade modifier 1); this totals 12% digit impairment. Per Table 15-8, Physical Examination Adjustment, a 12% digit impairment is consistent with grade modifier 1. If rated by range of motion, the impairment would have been 12% digit with no adjustments for functional history since it was the same as the impairment class for range of motion
- 15-9: Impairment Rating: Regional Impairment: Diagnosis of distal biceps tendon rupture and per criteria of residual loss of strength and ~~uncomplicated or stable with normal motion~~,

assigned to class 1 UEI with midrange default value of 5% UEI. Adjustment Grids: Functional History: Grade modifier 2 (pain with normal activity); Physical Examination: Grade modifier 1 due to muscle atrophy of 1 cm. Clinical Studies: n/a since defines the diagnosis criteria (biceps tendon rupture) Numerical adjustment is +1. Moved 1 position to the right of default value C to grade D. 6% UEI. Converts to 4% WPI

- 15-11: Impairment Rating: Regional impairment: Diagnosis of “Rotator cuff injury, full-thickness tear,” and per criteria of “Residual loss, functional **or uncomplicated or stable with normal motion**” assigned to class 1 with midrange default of 5% UEI. Adjustment Grids: Functional History: Grade modifier 2 for pain with normal activity. Physical Examination: Grade modifier 1 due to muscle atrophy of 1 cm. Clinical Studies: n/a (tear used as basis for diagnostic criteria and imaging studies pre-operative) Numerical adjustment is 11. Moved 1 position to the right of default value C to grade D. 6% UEI. Converts to 4% WPI.

Example 17-9: Vertebral Fractures at Multiple Levels

Subject: 35-year-old man.

History: A window washer fell from the second floor of a building on which he was working and sustained compression fractures of T7 and T8. The patient was treated with vertebroplasty and did well. After a short course of physical therapy, he was able to perform ADLs and resume most activities.

Current Symptoms: Moderate back pain with heavy physical activity. Left chest wall numbness over the seventh and eighth ribs.

Physical Exam: Mild hypesthesia, left posterior chest following left eighth rib; mild motion deficits with more limitation on right rotation than left.

Clinical Tests: Compression fractures of T7 (about 40%) and T8 (about 60%), treated with vertebroplasty.

Diagnosis: Compression fractures, T7 and T8, treated with vertebroplasty.

Impairment Rating: Regional impairment: Diagnosis consistent with “single or multiple level fractures with >50% compression of one vertebral body; with or without retropulsion; with or without pedicle and/or posterior element fracture; Healed; with or without surgical intervention; with **or without** residual deformity and **may have with or without** documented radiculopathy at a single clinically appropriate level present at the time of examination,” and therefore is assigned to Class 3 with default impairment of 14% WPI. Adjustment Grids: Functional History: Grade modifier 1 based on pain with strenuous activity; Physical Examination: Grade modifier 2, for sensory abnormalities. Clinical Studies: Clinical tests are not included because they are part of the class determination. Net adjustment compared with diagnostic class is -3, resulting in class 3, grade A. Impairment is 12% WPI.

Table 15-30 Thumb Range of Motion

Grade Modifier		0	1	2	3	4
Severity		None (Normal)	Mild	Moderate	Severe	Ankylosis
Motion (percentage compared to normal)		≥90%	61% to 90%	31% to 60%	≥30%	
Joint						
IP	15% Thumb					
Flexion	Motion° = % Thumb Impairment (% DI) (compared to normal)	≥80° = 0%	60° to 70° = 1% DI	50° to 30° = 3% DI	≤20° = 6% DI	20° = 7% DI + 10° to -10° or -30° to -40° = 9% DI ≥ +10° or ≥ -50° = 13% DI
Extension		≥+10° = 0%	0° = 1% DI	-10° to -30° lag = 3% DI	<< -30° lag 6% DI	
Ankylosis						20° = 7% DI + 10° to -40° < 20° or -30° > 20° to -40° = 9% DI ≥ +10° or ≥ -50° > -40° = 13% DI
MCP	10% Thumb					
Flexion	Motion° = % Thumb Impairment (% DI)	≥60° = 0%	40° to 50° = 2% DI	30° to 20° = 4% DI	≤10° = 5% DI	20° = 5% DI + 10° to 10 or 30° to 40° = 7% DI ≥ +10° or ≤ 50° = 9% DI
Extension		≥0° = 0%	-10° to -20° lag = 1% DI	-30° to -40° lag = 4% DI	≥ ≤ -50° lag = 5% DI	
Ankylosis						20° = 5% DI + 10° to 10 or 30° to 40° = 7% DI ≥ +10° or ≤ 50° = 9% DI

Table 15-31 Finger Range of Motion

Grade Modifier		0	1	2	3	4
Severity		None (Normal)	Mild	Moderate	Severe	Ankylosis
Motion (percentage compared to normal)		≥90%	61% to 90%	31% to 60%	≤30%	
Joint						
DIP	45% Finger					
Flexion	Motion° = % Digit Impairment (% DI)	≥70° = 0%	40° to 60° = 10% DI	10° to 30° = 25% DI	<10° = 40% DI	-20° = 30% DI

Grade Modifier		0	1	2	3	4
						+10° to -10° or -30° to -50° = 35% DI ≥+20° or ≤-60° = 45% DI
Extension		≥0° = 0%	-10° to -20° lag = 2% DI	-30° to 40° lag = 12% DI	≥ ≤-50° lag = 32% DI	
Ankylosis						-20° = 30% DI +10° to -10° or -30° to -50° = 35% DI ≥+20° or ≤-60° = 45% DI
PIP	80% Finger					
Flexion	Motion° = % Digit Impairment (% DI)	≥100° = 0%	90° = 6% DI 50° to 80° = 21% DI	20° to 40° = 42% DI	≤10° = 54% DI	-40° = 50% DI +10° to -10 or -50° to -70° = 60% DBI ≥+20° or ≤-80° = 80% DI
Extension		≥0° = 0%	-10° lag = 3% DI	-20° to -50° lag = 14% DI	≥ ≤-60° lag = 58% DI	
Ankylosis						-40° = 50% DI +10° to -10 or -50° to -70° = 60% DBI ≥+20° or ≤-80° = 80% DI
MCP	100% Finger					
Flexion	Motion° = % Digit Impairment (% DI)	≥90° = 0%	80° = 6% DI 40° to 70° = 19% DI	20° = to 30° = 35% DI	≤10° 48% DI	-30° = 45% DI ≥-30° or -40° to -60° = 60% DI ≤-70° = 90% DI
Extension		≥+20° = 0%	+10° to -20° lag = 7% DI	-30° to -60° lag = 34% DI	≥ ≤-70° lag = 91% DI	
Ankylosis						-30° = 45% DI ≥-30° or -40° to -60° = 60% DI ≤-70° = 90% DI